

NOV 01 2004

Atty Docket No. 021911-000600US

PTO FAX NO.: (703) 872-9306

ATTENTION: Examiner Celine X. Qian

Group Art Unit 1636

OFFICIAL COMMUNICATION
FOR THE PERSONAL ATTENTION OF
EXAMINER Celine X. Qian

CERTIFICATION OF FACSIMILE TRANSMISSION

I hereby certify that the following documents in re Application of Claire E. Lewis, et al., Application No. 09/284,009, filed April 5, 1999 for MONONUCLEAR PHAGOCYTES IN THERAPEUTIC DRUG DELIVERY are being facsimile transmitted to the Patent and Trademark Office on the date shown below.

Documents Attached

1. Transmittal Form (1 pg.)
2. Fee Transmittal (1 pg., 1 dup.)
3. Petition For Extension of Time (1 pg., 1 dup.)
4. Notice of Appeal (1 pg., 1 dup.)

Number of pages being transmitted, including this page: 8

Dated: November 1, 2004


Pamela Skelton

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TOWNSEND and TOWNSEND and CREW LLP
Two Embarcadero Center, Eighth Floor
San Francisco, CA 94111-3834
Telephone: 858-350-6100
Fax: (858) 350-6111

60346751 v1

NOV 01 2004

PTO/SB/17 (10-03)

**FEE TRANSMITTAL
for FY 2004**

Effective 10/01/2003. Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 450

Complete if Known

Application Number 09/284,009

Filing Date April 5, 1999

First Named Inventor Lewis, Claire E.

Examiner Name Celine X. Qian

Art Unit 1836

Attorney Docket No. 021911-000600US

METHOD OF PAYMENT (check all that apply)
☐ Check ☐ Credit Card ☐ Money Order ☐ Other ☐ None☒ Deposit Account:Deposit
Account
Number

20-1430

Deposit
Account
Name

Townsend and Townsend and Crew LLP

The Director is authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☒ Credit any overpayments☒ Charge any additional fee(s) or any underpayment of fee(s)☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION

1. BASIC FILING FEE

Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Description	Fee Paid
1001	770	2001	365	Utility filing fee	
1002	340	2002	170	Design filing fee	
1003	530	2003	265	Plant filing fee	
1004	770	2004	365	Reissue filing fee	
1005	160	2005	80	Provisional filing fee	

SUBTOTAL (1)

(\$)

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims	Extra Claims	Fee from below	Fee Paid
Independent Claims			
Multiple Dependent			

Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Description
1202	18	2202	9	Claims in excess of 20
1201	88	2201	43	Independent claims in excess of 3
1203	290	2203	145	Multiple dependent claim, if not paid
1204	88	2204	43	** Reissue independent claims over original patent
1205	18	2205	9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2)

(\$)

** or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)

2. ADDITIONAL FEES

Large	Small	Fee Code	Fee (\$)	Fee Description	Fee Paid
1051	130	2051	85	Surcharge - late filing fee or oath	
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet	
1053	130	1053	130	Non-English specification	
1812	2,520	1812	2,520	For filing a request for reexamination	
1804	920*	1814	920*	Requesting publication of SIR prior to Examiner action	
1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
1251	110	2251	55	Extension for reply within first month	110
1252	420	2252	210	Extension for reply within second month	
1253	850	2253	475	Extension for reply within third month	
1254	1,480	2254	740	Extension for reply within fourth month	
1255	2,010	2255	1,005	Extension for reply within fifth month	
1401	330	2401	165	Notice of Appeal	340
1402	330	2402	165	Filing a brief in support of an appeal	
1403	290	2403	145	Request for oral hearing	
1451	1,510	1451	1,510	Petition to institute a public use proceeding	
1452	110	2452	55	Petition to revive - unavoidable	
1453	1,330	2453	665	Petition to revive - unintentional	
1501	1,330	2501	665	Utility issue fee (or reissue)	
1502	480	2502	240	Design issue fee	
1503	640	2503	320	Plant issue fee	
1460	130	1460	130	Petitions to the Commissioner	
1807	50	1807	50	Petitions related to provisional applications	
1808	180	1808	180	Submission of Information Disclosure Sheet	
8021	40	8021	40	Recording each patent assignment per property (times number of properties)	
1809	770	2809	385	Filing a submission after final rejection (37 CFR § 1.129(a))	
1810	770	2810	385	For each additional invention to be examined (37 CFR § 1.129(b))	
1801	770	2801	385	Request for Continued Examination (RCE)	
1802	900	1802	900	Request for expedited examination of a design application	

Other fee (specify)

*Reduced by Basic Filing Fee Paid SUBTOTAL (3)

(\$450)

SUBMITTED BY

Complete if applicable

Name (Print/Type)

Kawai Lau

Registration No. (Attorney/Agent)

44461

Telephone

858-350-6100

Signature

Date

November 1, 2004

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60324916 v1

PTO/SB/21 (04-04)

TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	09/284,009	
	Filing Date	April 5, 1999	
	First Named Inventor	Lewis, Claire E.	
	Art Unit	1838	
	Examiner Name	Celine X. Qian	
Total Number of Pages in This Submission	7	Attorney Docket Number	021911-000600US

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.62 or 1.63	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input checked="" type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks: The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm or Individual name	Townsend and Townsend and Crew LLP	
Signature	Kawai Lau	Reg. No. 44461
Date	November 1, 2004	

CERTIFICATE OF TRANSMISSION/MAILING		
I hereby certify that this correspondence is being facsimile transmitted to the Patent and Trademark Office, Fax No. (703) 872-9308 on November 1, 2004.		
Typed or printed name	Pamela Skelton	
Signature		Date: November 1, 2004

60324932 v1

PTO/SB/17 (10-03)

FEE TRANSMITTAL for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 450

Complete if Known

Application Number 09/284,009
 Filing Date April 5, 1999
 First Named Inventor Lewis, Claire E.
 Examiner Name Celine X. Qian
 Art Unit 1636
 Attorney Docket No. 021911-000600US

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ Other ☐ None

☒ Deposit Account:

Deposit Account Number 20-1430

Deposit Account Name Townsend and Townsend and Crew LLP

The Director is authorized to: (check all that apply)

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☒ Charge any additional fee(s) or any underpayment of fee(s)

☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

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1003	530	2003	265	Plant filing fee	
1004	770	2004	365	Reissue filing fee	
1005	180	2005	80	Provisional filing fee	

SUBTOTAL (1) (\$) 1060

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims	Extra Claims	Fee from below	Fee Paid
Independent Claims	1**		
Multiple Dependent	1**		

Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Description	Fee Paid
1202	18	2202	9	Claims in excess of 20	
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SUBTOTAL (2) (\$) 390

**or number previously paid, if greater. For Reissues, see above

FEE CALCULATION (continued)					
Large	Entity	Small	Entity	Fee Description	Fee Paid
1051	130	2051	85	Surcharge - late filing fee or oath	
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1802	900	1802	900	Request for expedited examination of a design application	
Other fee (specify):					
*Reduced by Basic Filing Fee Paid					
SUBTOTAL (3)					(\$450)

SUBMITTED BY

Name (Print/Type) Kawai Lau Registration No. (Attorney/Agent) 44461 Telephone 858-350-6100

Signature  Date November 1, 2004

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